

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS3119AGZ	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/13/2010
NAME OF PROVIDER OR SUPPLIER DESERT INN RESIDENTIAL CARE		STREET ADDRESS, CITY, STATE, ZIP CODE 2845 BURNHAM AVE LAS VEGAS, NV 89109		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	<p>Initial Comments</p> <p>Surveyor: 27364</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility on 1/13/10. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility is licensed for four Residential Facility for Group beds which provide care to persons with Alzheimer's disease, Category II residents. The census at the time of the survey was three. Three resident files were reviewed and four employee files were reviewed. One discharged resident file was reviewed.</p> <p>The facility received a grade of D.</p> <p>The following deficiencies were identified:</p>	Y 000		
Y 070 SS=E	<p>449.196(1)(f) Qualifications of Caregiver-8 hours training</p> <p>NAC 449.196 1. A caregiver of a residential facility must: (f) Receive annually not less than 8 hours of training related to providing for the needs of the residents of a residential facility.</p> <p>This Regulation is not met as evidenced by:</p>	Y 070		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 070	Continued From page 1 Surveyor: 27364 Based on record review on 1/13/10, the facility failed to ensure 1 of 4 employees received eight hours of medical management annual training (Employee #4). Severity: 2 Scope: 2	Y 070		
Y 103 SS=F	449.200(1)(d) Personnel File - NAC 441A / Tuberculosis NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee. This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review on 1/13/10, the facility failed to ensure 1 of 4 employees complied with NAC 441A.375 regarding tuberculosis (TB) testing for the protection of all residents (Employee #4). Findings include; Employee #4's file had evidence of a negative TB skin test dated 2/18/09. However, the file lacked evidence of an initial two-step TB skin test. This was a repeat deficiency from the 2/11/09 State Licensure survey. Severity: 2 Scope: 3	Y 103		

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Y 105 SS=F	<p>449.200(1)(f) Personnel File - Background Check</p> <p>NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive.</p> <p>This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review on 1/13/10, the facility failed to ensure 3 of 4 employees met background check requirements (Employee #2, #3 and #4).</p> <p>This was a repeat deficiency from the 2/11/09, State Licensure survey.</p> <p>Severity: 2 Scope: 3</p>	Y 105			
Y 106 SS=E	<p>449.200(2)(a) Personnel File - 1st aid & CPR</p> <p>NAC 449.200 2. The personnel file for a caregiver of a residential facility must include, in addition to the information required pursuant to subsection 1, (a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation.</p> <p>This Regulation is not met as evidenced by:</p>	Y 106			

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Y 106	Continued From page 3 Surveyor: 27364 Based on record review on 1/13/09, the facility failed to ensure that 1 of 4 employees were trained in first aid and cardiopulmonary resuscitation (Employee #1). This was a repeat deficiency from the 2/11/09 State Licensure survey. Severity: 2 Scope: 2	Y 106		
Y 253 SS=F	449.217(4) Adequate Supplies of Food NAC 449.217 4. The administrator of a residential facility shall ensure that there is at least a 2-day supply of fresh food and at least a 1-week supply of canned food in the facility at all times. This Regulation is not met as evidenced by: Surveyor: 27364 Based on observation and interview on 1/13/10 the facility failed to provide at least a 2-day supply of fresh food for 3 of 3 residents. Findings include: Resident #1 stated on 1/21/09, all we get is fish sticks and meat patties for lunch and dinner. On 1/21/09, Employee #3 stated dinner would be beef patties instead of the pork listed on the menu. Employee # 3 said the pork was not available. On 1/13/09, a bag of frozen vegetables was observed in the freezer, but no evidence of any fresh fruit or vegetables. Severity: 2 Scope: 3	Y 253		

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Y 272 SS=C	<p>449.2175(3) Service of Food - Menus</p> <p>NAC 449.2175 3. Menus must be in writing, planned a week in advance, dated, posted and kept on file for 90 days.</p> <p>This Regulation is not met as evidenced by: Surveyor: 27364 Based on observation and interview on 1/13/10, the facility failed to ensure a planned, dated and posted menu was utilized.</p> <p>Severity: 1 Scope: 3</p>	Y 272		
Y 859 SS=E	<p>449.274(5) Periodic Physical examination of a resident</p> <p>NAC 449.274 5. Before admission and each year after admission, or more frequently if there is a significant change in the physical condition of a resident, the facility shall obtain the results of a general physical examination of the resident by his physician. The resident must be cared for pursuant to any instructions provided by the resident's physician.</p> <p>This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review on 1/13/10, the facility failed to ensure 1 of 3 residents received an annual physical (Resident #3).</p>	Y 859		

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Y 859	Continued From page 5	Y 859		
Y 878 SS=F	<p>Severity: 2 Scope: 2</p> <p>449.2742(6)(a)(1) Medication / Change order</p> <p>NAC 449.2742</p> <p>6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident:</p> <p>(a) The caregiver responsible for assisting in the administration of the medication shall:</p> <p>(1) Comply with the order.</p> <p>This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review and interview on 1/13/10 and 1/21/10, the facility failed to ensure that 2 of 3 residents received medications as prescribed (Resident #1, and #2).</p> <p>Findings include:</p> <p>Resident #1</p> <p>Was prescribed Cymbalta 60 mg capsules, take 1 capsule daily for depression. The Medication Administration Record (MAR) indicated it was started on 11/12/09 and stopped on 12/26/09. The MAR indicated the medication had not been administered from 12/26/09 through 1/13/09.</p>	Y 878		

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Y 878	<p>Continued From page 6</p> <p>Was prescribed Crestor 10 mg tabs take 1 tab at bedtime to lower cholesterol. The MAR indicated it was started on 11/12/09 and stopped on 12/26/09. The MAR indicated the medication had not been administered from 12/26/09 through 1/13/09.</p> <p>Was prescribed Finasteride 5 mg tablets, take 1 tablet by mouth at bedtime to reduce prostate enlargement. The MAR indicated it was started on 11/12/09 and stopped on 12/26/09. The MAR indicated the medication had not been administered from 12/26/09 through 1/13/09.</p> <p>Employee #3 said, Resident #1 ran out of the medication and could not afford the co-pay to purchase the medication. Employee #1, Administrator/Owner, stated Resident #1 was going to the Veterans Administration (VA) Clinic to obtain his medication in a week to avoid the co-pay. Employee #1 added he had to see a VA provider first in order to obtain medications from the VA clinic.</p> <p>Directed by the surveyor, on 1/13/09, Employee #1 purchased a weeks supply of Cymbalta, Crestor and Finasteride for Resident #1, until he was able to resume his own supply of these medications from the VA clinic.</p> <p>On 1/21/10, the MAR for Resident #1, indicated Cymbalta, Crestor and Finasteride were administered from 1/13/10 until 1/18/10. Employee #3 stated Resident #1's physician had discontinued the Cymbalta and Crestor effective 1/21/10. Finasteride 5 mg tablets was refilled with 30 tabs on 1/21/10. Employee #3 reported he was going to administer Finasteride to Resident #1 at bedtime as prescribed on 1/21/10. Review of Resident #1's file provided evidence of the</p>	Y 878			

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Y 878	Continued From page 7 discontinued orders for Cymbalta and Crestor effective 1/21/10. Resident #1 on 1/21/10, advised he had not suffered any ill effects from not receiving his medications. Resident #2 Was prescribed Iron 65 mg tablets, take 1 tablet by mouth daily. The MAR indicated the last tablet was administered on 12/30/09. The January 2010 MAR had no evidence of this medication being administered by the facility. Resident #2's file had a medication order dated 4/8/09 for this prescription. There was no evidence of a discontinue order in the file. Employee #1 on 1/26/10, stated she had just obtained a new script from the physician and was having it filled today. This was a repeat deficiency from the 2/11/09 State Licensure survey. Severity: 2 Scope: 3	Y 878		
Y 883 SS=E	449.2742(7) Medication / Resident Refusal NAC 449.2742 7. If a resident refuses, or otherwise misses, and administration of medication, a physician must be notified within 12 hours after the dose is refused or missed. This Regulation is not met as evidenced by: Surveyor: 27364	Y 883		

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Y 883	Continued From page 8 Based on record review on 1/13/10, the facility failed to ensure the physician was notified for 2 of 3 residents who missed or refused medications (Resident #1 and #2) Findings include: Resident #1 was prescribed Butalb APAP-CAFF SO 325, 40 tablets 3 times daily for tension headaches. The MAR noted Resident #1 has refused the medication for the months of November 2009, December 2009 and January 2010 through 1/13/10. Resident #1's file lacked any evidence of physician notification of medication refusal. . Resident #1 and Resident #2 missed medications see TAG Y878. Resident #1's and Resident #2's files lacked any evidence of physician notification of missed medications. Severity: 2 Scope: 2	Y 883			
Y 990 SS=F	449.2756(1)(a) Alzheimer's facility pools NAC 449.2756 1. The administrator of a residential facility which provides care to persons with Alzheimer's disease shall ensure that: (a) Swimming pools and other bodies of water are fenced or protected by other acceptable means. This Regulation is not met as evidenced by: Surveyor: 27364 Based on observation on 1/13/10, the facility	Y 990			

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Y 990	Continued From page 9 failed to ensure a swimming pool was protected by an acceptable means to prevent access by 3 of 3 residents (Resident #1, #2, and #3). Findings include: The empty swimming pool with some residual water and leaves had a protective fence. However, the metal in the fence gates had rusted through in several locations creating an unsecured barrier. Severity: 2 Scope: 3	Y 990			
Y 991 SS=F	449.2756(1)(b) Alzheimer's Fac door alarm NAC 449.2756 1. The administrator of a residential facility which provides care to persons with Alzheimer's disease shall ensure that: (b) Operational alarms, buzzers, horns or other audible devices which are activated when a door is opened are installed on all doors that may be used to exit the facility. This Regulation is not met as evidenced by: Surveyor: 27364 Based on observation on 1/13/10, the facility failed to ensure that 1 of 2 of exit doors had installed alarms that operated when the exit door was opened. The back patio exit door alarm was not working on 1/13/10. Severity: 2 Scope: 3	Y 991			

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Y 992	Continued From page 10	Y 992			
Y 992 SS=F	<p>449.2756(1)(c) Alzheimer's Fac awake staff</p> <p>NAC 449.2756 1. The administrator of a residential facility which provides care to persons with Alzheimer's disease shall ensure that: (c) At least one member of the staff is awake and on duty at the facility at all times.</p> <p>This Regulation is not met as evidenced by: Surveyor: 27364 Based on interview on 1/13/10, the facility failed to ensure one member of the staff was awake at the facility at all times. Employee #3 stated on 1/13/10, there is a time at night when everyone sleeps, caregivers and residents, and no one is awake.</p> <p>Severity: 2 Scope: 3</p>	Y 992			
Y 999 SS=F	<p>449.2754(1)(g) Alzheimer's Facility-Toxic substances</p> <p>NAC 449.2756 1. The administrator of a residential facility which provides care to persons with Alzheimer's disease shall ensure that: (g) All toxic substances are not accessible to the residents of the facility.</p>	Y 999			

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Y 999	<p>Continued From page 11</p> <p>This Regulation is not met as evidenced by: Surveyor: 27364</p> <p>Based on observation on 1/13/10, the facility failed to ensure toxic substances were inaccessible to the 3 of 3 residents (A gasoline container with gasoline was located in the back yard unsecured).</p> <p>This is a repeat deficiency from the 2/11/09 annual State Licensure survey.</p> <p>Severity: 2 Scope: 3</p>	Y 999			

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